

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

I.U.O.E. LOCAL 825 POLITICAL ACTION AND EDUCATION COMMITTEE

ADDRESS (number and street)

65 SPRINGFIELD AVE

☐Check if different  
than previously  
reported. (ACC)

SPRINGFIELD

NJ

07081

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00017194

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☒July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

05

18

2006

through

06

30

2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

I.U.O.E. Local825 Joseph Whittles

Signature of Treasurer

Electronically Filed by I.U.O.E. Local825 Joseph Whittles

Date

07

06

2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 02/2003)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

I.U.O.E. LOCAL 825 POLITICAL ACTION AND EDUCATION COMMITTEE

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	5	1	8	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2006</span>		251167.46
(b) Cash on Hand at Beginning of Reporting Period .....	214383.49	
(c) Total Receipts (from Line 19) .....	51127.19	148454.36
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	265510.68	399621.82
7. Total Disbursements (from Line 31) .....	23505.00	157616.14
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	242005.68	242005.68
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

I.U.O.E. LOCAL 825 POLITICAL ACTION AND EDUCATION COMMITTEE

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	5	1	8	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	51090.87	148218.02
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➤	51090.87	148218.02
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ..... ➤	51090.87	148218.02
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	36.32	236.34
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	51127.19	148454.36
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	51127.19	148454.36

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	5.00	14836.14
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	5.00	14836.14
22. Transfers to Affiliated/Other Party Committees.....	0.00	50000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	650.00	12150.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	22850.00	80630.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	23505.00	157616.14
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	23505.00	157616.14

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	51090.87	148218.02
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	51090.87	148218.02
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	5.00	14836.14
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	5.00	14836.14

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 15

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

I.U.O.E. LOCAL 825 POLITICAL ACTION AND EDUCATION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
WACHOVIA BANK, NATIONAL ASSOC.

Mailing Address NC8502  
P.O. BOX 563966

City State Zip Code  
CHARLOTTE NC 28262-3966

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

66553.55

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 6

Transaction ID: SA17.5195

Amount of Each Receipt this Period

35.98

Interest Earned

**B.** Full Name (Last, First, Middle Initial)  
WACHOVIA BANK, NATIONAL ASSOC.

Mailing Address NC8502  
P.O. BOX 563966

City State Zip Code  
CHARLOTTE NC 28262-3966

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

66553.89

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 6

Transaction ID: SA17.5196

Amount of Each Receipt this Period

0.34

Interest Earned

**SUBTOTAL** of Receipts This Page (optional) .....

36.32

**TOTAL** This Period (last page this line number only) .....

36.32

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 7 / 15

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

I.U.O.E. LOCAL 825 POLITICAL ACTION AND EDUCATION COMMITTEE

Full Name (Last, First, Middle Initial)

**A.** WACHOVIA BANK, NATIONAL ASSOC.

Mailing Address NC8502  
P.O. BOX 563966

City CHARLOTTE State NC Zip Code 28262-3966

Purpose of Disbursement

Bank Charge

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.5197

Date of Disbursement

MM / DD / YYYY  
05 / 31 / 2006

Amount of Each Disbursement this Period

5.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5.00

**TOTAL** This Period (last page this line number only) .....

5.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 / 15

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

I.U.O.E. LOCAL 825 POLITICAL ACTION AND EDUCATION COMMITTEE

Full Name (Last, First, Middle Initial)

**A.** FRIENDS OF MAURICE HINCHEY

Mailing Address P.O. Box 4497

City  
Kingston

State  
NY

Zip Code  
12402

Purpose of Disbursement  
Cocktail Reception

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: NY

District: 22

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.5177

Date of Disbursement

MM / DD / YYYY  
06 / 05 / 2006

Amount of Each Disbursement this Period

650.00

**SUBTOTAL** of Disbursements This Page (optional) .....

650.00

**TOTAL** This Period (last page this line number only) .....

650.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 / 15

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

I.U.O.E. LOCAL 825 POLITICAL ACTION AND EDUCATION COMMITTEE

Full Name (Last, First, Middle Initial)

**A. CHENANGO COUNTY REPUBLICAN COMMITTEE**

Mailing Address 72 WEST MAIN STREET

City NORWICH State NY Zip Code 13815

Purpose of Disbursement  
Reception

Candidate Name

011  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.5183

Date of Disbursement

M M / D D / Y Y Y Y  
0 6 / 0 5 / 2 0 0 6

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

**B. CITIZENS FOR KIRWAN**

Mailing Address 11 Cathy Drive

City Newburgh State NY Zip Code 12550

Purpose of Disbursement  
Reception

Candidate Name

011  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.5190

Date of Disbursement

M M / D D / Y Y Y Y  
0 6 / 2 2 / 2 0 0 6

Amount of Each Disbursement this Period

400.00

Full Name (Last, First, Middle Initial)

**C. CMTE. RE-ELECT GANNON AND FORD**

Mailing Address 906 Allaire Road

City Spring Lake Height State NJ Zip Code 07762

Purpose of Disbursement  
Reception

Candidate Name

011  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.5162

Date of Disbursement

M M / D D / Y Y Y Y  
0 5 / 1 8 / 2 0 0 6

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) ..... ►

1500.00

TOTAL This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 / 15

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

I.U.O.E. LOCAL 825 POLITICAL ACTION AND EDUCATION COMMITTEE

Full Name (Last, First, Middle Initial)

**A. CMTE. TO ELECT ELWIN WOOD**

Mailing Address P.O. Box 52

City Roscoe State NY Zip Code 12776

Purpose of Disbursement  
Reception

Candidate Name

011  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.5192

Date of Disbursement

M M / D D / Y Y Y Y  
0 6 / 2 2 / 2 0 0 6

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

**B. CMTE. TO ELECT SHARON O'DELL**

Mailing Address

City State Zip Code

Purpose of Disbursement  
Direct Contribution

Candidate Name

011  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.5188

Date of Disbursement

M M / D D / Y Y Y Y  
0 6 / 2 2 / 2 0 0 6

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. CMTE. TO RE-ELECT SAM WOHL**

Mailing Address 61 Park Avenue

City Monticello State NY Zip Code 12701

Purpose of Disbursement  
Reception

Candidate Name

011  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.5186

Date of Disbursement

M M / D D / Y Y Y Y  
0 6 / 2 2 / 2 0 0 6

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) ..... ►

1700.00

TOTAL This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 / 15

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

I.U.O.E. LOCAL 825 POLITICAL ACTION AND EDUCATION COMMITTEE

Full Name (Last, First, Middle Initial)

## **A. DELAWARE COUNTY DEMOCRATIC COMMITTEE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Reception

Candidate Name

011

Category/  
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

2006

☒ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Transaction ID: SB29.5182

Date of Disbursement

06 / 05 / 2006

Amount of Each Disbursement this Period

350.00

Full Name (Last, First, Middle Initial)

## **B. DORIA FOR MAYOR 2006**

Mailing Address P.O. Box 1063

City

Bayonne

State

NJ

Zip Code

07002

Purpose of Disbursement

Direct Contribution-Runoff

Candidate Name

011

Category/  
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

2006

☐ Primary

☒ General

☐ Other (specify) ▼

State:

District:

Transaction ID: SB29.5170

Date of Disbursement

06 / 09 / 2006

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

## **C. ELECTION FUND OF DONALD PAYNE, JR.**

Mailing Address P.O. Box 4314

City

Newark

State

NJ

Zip Code

07114

Purpose of Disbursement

Direct Contribution

Candidate Name

011

Category/  
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

2006

☐ Primary

☒ General

☐ Other (specify) ▼

State:

District:

Transaction ID: SB29.5172

Date of Disbursement

06 / 13 / 2006

Amount of Each Disbursement this Period

500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5850.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 12 / 15

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

I.U.O.E. LOCAL 825 POLITICAL ACTION AND EDUCATION COMMITTEE

Full Name (Last, First, Middle Initial)

## **A. ELECTION FUND OF KIMBLE, KENNEDY, MASI**

Mailing Address 15 Llyod Place

City Belleville State NJ Zip Code 07109

Purpose of Disbursement  
Reception

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2006 ☐ Primary ☒ General ☐ Other (specify) ▼

State: District:

Transaction ID: SB29.5175

Date of Disbursement

06 / 27 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

## **B. ELECTION FUND OF SENATOR CODEY**

Mailing Address 449 Mt. Pleasant Avenue  
Suite 102

City West Orange State NJ Zip Code 07052

Purpose of Disbursement  
Cocktail Reception

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2006 ☒ Primary ☐ General ☐ Other (specify) ▼

State: District:

Transaction ID: SB29.5165

Date of Disbursement

05 / 30 / 2006

Amount of Each Disbursement this Period

4200.00

Full Name (Last, First, Middle Initial)

## **C. FRIENDS OF ALEX GROMACK**

Mailing Address 23 Reginald Drive

City Congers State NY Zip Code 10920

Purpose of Disbursement  
Reception

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2006 ☐ Primary ☒ General ☐ Other (specify) ▼

State: District:

Transaction ID: SB29.5184

Date of Disbursement

06 / 15 / 2006

Amount of Each Disbursement this Period

1400.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 15

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

I.U.O.E. LOCAL 825 POLITICAL ACTION AND EDUCATION COMMITTEE

Full Name (Last, First, Middle Initial)

## **A. FRIENDS OF ASSEMBLYWOMAN MCHOSE**

Mailing Address P.O. Box 23

City Franklin State NJ Zip Code 07416

Purpose of Disbursement  
Cocktail Reception

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.5168

Date of Disbursement

05 / 31 / 2006

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

## **B. FRIENDS OF CLIFF CROUCH**

Mailing Address P.O. Box 7334

City Albany State NY Zip Code 12224

Purpose of Disbursement  
Cocktail Reception

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.5178

Date of Disbursement

05 / 26 / 2006

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

## **C. GLOUCESTER COUNTY DEMOCRATIC COMMITTEE**

Mailing Address P.O. Box 751

City Woodbury State NJ Zip Code 08096

Purpose of Disbursement  
Reception

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.5173

Date of Disbursement

06 / 26 / 2006

Amount of Each Disbursement this Period

1500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 14 / 15

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

I.U.O.E. LOCAL 825 POLITICAL ACTION AND EDUCATION COMMITTEE

Full Name (Last, First, Middle Initial)

**A. HIGGINS FOR SHERIFF**

Mailing Address 15 South Main Street

City Woodstown State NJ Zip Code 08098

Purpose of Disbursement  
Cocktail Reception

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2006 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.5167

Date of Disbursement

05 / 30 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. HUGHES FOR MERCER COUNTY EXECUTIVE**

Mailing Address 50 West State Street

City Trenton State NJ Zip Code 08608

Purpose of Disbursement  
Reception

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2006 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.5169

Date of Disbursement

06 / 06 / 2006

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**C. LITTELL FOR SENATE**

Mailing Address 49 Church Street  
P.O. Box 328

City Franklin State NJ Zip Code 07416

Purpose of Disbursement  
Cocktail Reception

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2006 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.5171

Date of Disbursement

06 / 10 / 2006

Amount of Each Disbursement this Period

600.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 15 / 15

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

I.U.O.E. LOCAL 825 POLITICAL ACTION AND EDUCATION COMMITTEE

Full Name (Last, First, Middle Initial)

## **A. PARAMUS DEMOCRATIC ORGANIZATION**

Mailing Address JOSEPH CONGILIO  
C/O L. ROMANO

City PARAMUS State NJ Zip Code 07652

Purpose of Disbursement  
Reception Sponsor

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2006 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.5164

Date of Disbursement

05 / 23 / 2006

Amount of Each Disbursement this Period

1100.00

Full Name (Last, First, Middle Initial)

## **B. SOTTILE-NOBLE COMMITTEE**

Mailing Address 71 ALBANY AVE.

City KINGSTON State NY Zip Code 12401

Purpose of Disbursement  
Reception

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2006 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.5180

Date of Disbursement

06 / 05 / 2006

Amount of Each Disbursement this Period

300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1400.00

**TOTAL** This Period (last page this line number only) .....

22850.00